



Docket No: 979-102

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s) : Mougini Thierry

Group Art Unit: 3651

Serial No. : 10/518,327

Examiner: Tran

Filed : January 21, 2005

For : METHOD FOR DIAGNOSING MALFUNCTION OF APPARATUS DELIVERING  
GOODS AND SERVICES AGAINST PAYMENT

**PETITION AND FEE FOR EXTENSION OF TIME (37 C.F.R. §1.136(a))**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

1. This is a petition for an extension of time for filing an Amendment.
2. The communication in connection with the matter for which this extension is requested  
☒ [X] is filed herewith.  
☐ [ ] has been filed on \_\_\_\_\_.
3. ☐ [ ] Applicant is a small-entity -- verified statement is attached ☐ [ ], or has already been filed. ☐ [ ].

- |   | <u>Total Months<br/>Requested</u> | <u>Fee for Other<br/>than Small Entity</u> | <u>Fee for<br/>Small Entity</u> |
|---|-----------------------------------|--|---------------------------------|
| a. <input type="checkbox"/> [ ]   | one month                         | \$120.00                                   | \$60.00                         |
| b. <input type="checkbox"/> [ ]   | two months                        | \$450.00                                   | \$225.00                        |
| c. <input checked="" type="checkbox"/> [X]  | three months                      | \$1050.00                                  | \$510.00                        |
| d. <input type="checkbox"/> [ ]   | four months                       | \$1590.00                                  | \$795.00                        |
| e. <input type="checkbox"/> [ ]   | five months                       | \$2,160.00                                 | \$1,080.00                      |
| f. <input type="checkbox"/> [ ] An extension for _____ months has already been secured for filing the above-identified communication and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested. The fee for this extension (\$ _____), minus the fee previously paid (\$ _____) equals \$ _____ (total fee due). |                                   |  |                                 |
5. ☒ [X] A check in the amount of \$1,050.00 to cover the extension fee is attached.
  6. ☐ [ ] Charge \$00 to Deposit Account No. 19-2825 Order No. \_\_\_\_\_
  7. ☒ [X] The Commissioner is hereby authorized to charge any additional fees which may be required by this paper, or credit any overpayment to Deposit Account No. 19-2825. Order No. 979-102.

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Respectfully submitted,  
SOFER & HAROUN, L.L.P

Dated: March 17, 2008

By: \_\_\_\_\_

Joseph Sofer

Registration No. 34,438

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